

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5408 OF 11058

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Fair Fight**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Socholtzky, David, , ,**

Mailing Address 1430 Acton St

City  
BerkeleyState  
CAZip Code  
94702-1239FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Clinical Psychologists

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2020

**Transaction ID : VR060ZM2W1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sodowick, Bradford, , ,**

Mailing Address 19 Lookout Ln

City

Washington Crossing

State

PA

Zip Code

18977-1137

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Drexel University

Occupation (for Individual)

Professor

Receipt For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼  
Run-off Primary

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2020

**Transaction ID : VR060ZKGRN2**

Amount of Each Receipt this Period

700.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Soffer, Marsha, , ,**Mailing Address 19501 Biscayne Blvd  
Ste 400

City

Aventura

State

FL

Zip Code

33180-2337

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Management

Occupation (for Individual)

Turnberry Associates

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2020

**Transaction ID : VR060ZAAZN3**

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5950.00